

PRIVACY NOTICE

All social security numbers are requested by this agency in accordance with the requirements of the Internal Revenue Code. Disclosure is mandatory and this form will not be processed without this information.

W-4P (Substitute) Tax Withholding Certificate

Your PERF benefits are subject to federal income tax withholding. Complete this form to inform PERF of your federal income tax withholding election. Once you make an election, it will remain in effect until you change or revoke it. If you choose not to have tax withheld or do not have enough tax withheld, you may have to make estimated tax payments to the IRS. You may be subject to penalties if your payments of estimated tax and withholding are not sufficient.

| A | 1 | L | | | - | rm | -4 | - 10 | |
|---|----|----|-----|----|-----|----|-----|------|---|
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Withholding Election

| Name (Last, First, Middle) | Social Security Number |
|--|--|
| Street Address | City/ State/ Zip Code |
| Phone Number (area code first) | Date |
| Federal Income Tax Withholding Elec | ction |
| 1. I elect NOT to have federal income tax withheld from ecomplete lines 2 or 3.) | each periodic pension payment. (If you choose this election, then do not |
| OR | |
| | pension payment, which is figured by using the number of allowances e worksheet on the reverse side of this form to figure your allowances. DW. Married Married, but withholding at the higher, single rate. |
| B. Enter number of allowances: | |
| OPTIONAL - Only if you completed line 2, parts A In addition to the amount withheld based on line 2, I | A and B: want the following amount withheld from each periodic pension payment: |
| (You cannot enter an amount here unless you co | mpleted line 2, parts A and B.) \$ |
| OR | |
| 3. I only want the following dollar amount withheld from e | each periodic pension payment: \$ |
| Member Authorization | |
| Please sign here | |
| Member Signature | Printed Name |
| Upon completion, please send this form to PERF at 143 West You may also fax it to (317) 234-1226. If you fax this documer | |
| W-4P (Substitute) Tax 143 W. Market Str | reet Indianapolis, IN 46204 State Form 52578 (2-06) |

1-888-526-1687

www.perf.in.gov

Personal Allowances Worksheet

| A | Enter "1" for yourself if no one else can claim you as a dependent | Α |
|---|--|---|
| В | Enter "1" if: You are single and have only one pension; or You are married, have only one pension and your spouse has no income subject to withholding; or Your income from a second pension or a job, or your spouses pension or wages (or the total of all) is \$1000 or less | В |
| С | Enter "1" for your spouse . But, you may choose to enter "-0-" if you are married and have either a spouse who has income subject to withholding or you have more than one source of income subject to withholding. (Entering "-0-" may help you avoid having too little tax withheld.) | c |
| D | Enter number of dependents (other than your spouse or yourself) you will claim on your tax return | D |
| Ε | Enter "1" if you will file as head of household on your tax return | E |
| F | Child Tax Credit (including additional child tax credit): If your total income will be less than \$55,000 (\$82,000 if married), enter "2" for each eligible child; or If your total income will be between \$55,000 and \$84,000 (\$82,000 and \$119,000 if married), enter "1" for each eligible child, plus "1" additional if you have four or more eligible children | F |
| G | Add lines A through F and enter total here. (Note: This may be different from the number of exemptions you claim on your tax return.) | G |

For accuracy, complete all worksheets that apply:

- If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the IRS **Deductions and Adjustments Worksheet** on the next page.
- If you have more than one source of income subject to withholding or a spouse with income subject to withholding and your combined income from all sources exceeds \$35,000 (\$25,000 if married), see the **Multiple Pensions/More Than-One-Income Worksheet** on the next page to avoid having too little tax withheld.
- If neither of the above situations applies, stop here and enter the number from line G for your allowances on line 2.

Deductions and Adjustments Worksheet

| | e. Use this wo | | olan to item | ize deductions, c | laim certain credits, d | or claim adj | ustments | to in | come | e on |
|---|---|--|-----------------------|---|--|-----------------------|-----------------------|------------------|---------|--------------------------|
| 1 | | | | | | b | \$ | | | |
| 2 | Enter: $\begin{cases} \$10\\ \$7\\ \$5 \end{cases}$ | 0,300 if married filing 7,550 if head of hous 5,150 if single 5,150 if married filing | jointly or quehold | | | | | - | \$ | |
| 3 4 | Subtract line 2 from line 1. If line 2 is greater than line 1, enter "-0-" | | | | | | | Φ. | | |
| 5 | | loan interest | | | ounts from Workshee | t 7 in Dub | 010) | 4 5 | \$ | |
| 5 6 | | | | | | | | 6 | \$ | |
| 7 | Enter an estimate of your 2006 income not subject to withholding (such as dividends or interest) | | | | | | 7 | \$ | | |
| 8 | | | | | ere. Drop any fractio | | | 8 | | |
| 9 | Enter the nu | mber from the Perse | onal Allowa | nces Workshee | t, line G, page 1 | | | 9 | | |
| 10 | Add lines 8 and 9 and enter the total here. If you use the Multiple Pensions/More-Than-One-Income Worksheet, also enter this total on line 1 below. Otherwise, stop here and enter this total on Form | | | | | | | | | |
| | VV -11, IIIIC Z | | | | n-One-Income W | | <u> </u> | - 10 | | |
| Note | . Complete only | | | | his applies if you (and yo | | narried filin | a a ioi | nt retu | ırn) have more |
| | | | | | ion, or a pension and a j | | | | | |
| 1 | Enter the num | ber from line G, page 1 | or from line 1 | 0 above if you used | the Deductions and A | djustments V | Vorkshee | t) 1 | | |
| 2 | | | | | ST paying pension or | - | | | | |
| 3 | | • | | | line 1. Enter the res | • | | | | |
| Not | - | | | | t of this worksheet. 2, page 1. Complete | | | | | e additional |
| | | int necessary to avoi | | | z, page 1. Complete | III 163 4–9 DE | HOW IO C | aicuic | ile ill | e additional |
| 4 | _ | = | - | | | 4 | | _ | | |
| 5 | Enter the number from line 2 of this worksheet | | | | | | | | | |
| 6 | | e 5 from line 4 | | | | | | 6 | | |
| 7 | | | | | ST paying pension or | | | | \$ | |
| 8 | | • | | | additional annual wi | _ | | 8 | \$ | |
| 9 | | | | _ | . For example, divide Enter the result here | - | - | | | |
| | | 1. This is the addition | | | | | | | \$ | |
| | 71 0 | | | | -Than-One-Incom | | | | | |
| | | | Married F | iling Jointly | | | | | | thers |
| | unt from HIGHEST pension or job is— | AND, amount from LOWEST paying pension or job is— | Enter on line 2 above | If amount from HIGHEST paying pension or job is- | | Enter on line 2 above | If amount from | | - | Enter on line 2 above |
| 1 7 1 | \$0 - \$42,000 | \$0 - \$4,500 | 0 | \$42,001 and over | \$32,001 - \$38,000 | 6 | \$0 | - \$6,0 | 000 | 0 |
| | | 4,501 - 9,000 9,001 - 18,000 | 1 2 | | 38,001 - 46,000 46,001 - 55,000 | 7 8 | 6,001 12,001 | - 12,0 - 19,0 | | 1 2 |
| | | 18,001 and over | 3 | | 55,001 - 60,000 60,001 - 65,000 | 9 10 | 19,001 26,001 | - 26,0 | 000 | 3 4 |
| \$42,001 and over | | \$0 - \$4,500 | 0 | | 65,001 - 75,000 | 11 | | | 000 | 5 |
| | | 4,501 - 9,000 9,001 - 18,000 | 1 2 | | 75,001 - 95,000 95,001 - 105,000 | | | | | 5 6 7 |
| | | 18,001 - 22,000 22,001 - 26,000 | 3 4 | | 105,001 - 120,000 120,001 and over | 14 15 | 80,001 90,001 | | | 8 9 |
| 26,001 - 32,000 | | | 5 | | 120,001 | | | | | 10 |
| Table 2: Multiple Pensions/More-Than-One-Income Worksheet | | | | | | | | | | |
| | If amazin- | Married Filing Jo | | tor on | All Others If amount from HIGHEST | | | | Enta | on |
| If amount from HIGHEST paying pension or job is— | | | ter on e 7 above | if amount from paying pension | | | Enter on line 7 above | | | |
| | | \$0 - \$60,000 11 | | \$500 830 | | \$30,000 | | | \$ | \$500 830 |
| | 115,00 | 01 - 115,000 01 - 165,000 | | 830 920 | 30,001 - 75,001 - | 145,000 | | | | 830 920 |
| 165,001 - 290,000 290,001 and over | | | 1,090 1,160 | | 145,001 - 330,000 330,001 and over | | | 1,090 1,160 | | |